



AF 1646 #

28341/646 NC

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Vogeli et al.

Ser. No. : 09/698,419

Filed : October 27, 2000


Title : G Protein-Coupled  
Receptors Expressed In  
Brain

Art Unit : 1646

Examiner : J. Ulm

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P.O. Box 1450  
Alexandria, VA 22313-1450, on this date:

Date: October 24, 2003

  
Sharon M. Sintich  
Registration No. 48,484NOTIFICATION OF FURTHER ACTIONCommissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

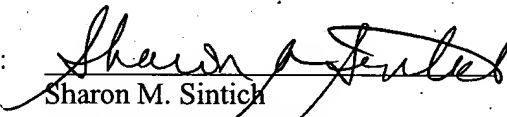
A Notice of Appeal was filed on July 14, 2003. The applicant files herewith a  
Petition for Extension of Time (two months) under 37 C.F.R. 1.136(a) and separately a  
Continuation Application Under 37 C.F.R. 1.53(b).

Respectfully submitted,

MARSHALL, GERSTEIN &amp; BORUN

Date: October 24, 2003

By:

  
Sharon M. Sintich  
Registration No. 48,484  
6300 Sears Tower  
233 South Wacker Drive  
Chicago, Illinois 60606-6357  
(312) 474-6300



Use in lieu of PTO/SB/17 (08-03)  
(Form updated to reflect FY 2004 fees effective 10/1/03)

<b>FEE TRANSMITTAL</b> <b>for FY 2004</b> <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/698,419
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 420.00		Filing Date	October 27, 2000
		First Named Inventor	Gabriel Vogeli
		Examiner Name	J. Ulm
		Art Unit	1646
		Attorney Docket No.	28341/6276NCP

<b>METHOD OF PAYMENT</b> (check all that apply)		<b>FEE CALCULATION</b> (continued)																																																																																																																																	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		<b>3. ADDITIONAL FEES</b>																																																																																																																																	
<input type="checkbox"/> Deposit Account: Deposit Account Number: 13-2855 Deposit Account Name: MARSHALL, GERSTEIN & BORUN LLP																																																																																																																																			
<b>The Director is authorized to:</b> (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																																																																																																			
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<b>SUBMITTED BY</b>		<b>(Complete if applicable)</b>	
Name (Print/Type)	Sharon M. Sintich	Registration No. (Attorney/Agent)	48,484
Signature	<i>Sharon M. Sintich</i>	Telephone	(312) 474-6631
		Date	October 24, 2003

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: October 24, 2003	Signature: <i>Sharon M. Sintich</i> (Sharon M. Sintich)